Delaware Division of Corporations 401 Federal Street – Suite 4

Dover, DE 19901 Phone: 302-739-3073 Fax: 302-739-3812

Certificate of Merger

Dear Sir or Madam:

Attached please find a Certificate of Merger form to be filed in accordance with the Limited Partnership Act of the State of Delaware. The fee to file the Certificate is \$200.00. You will receive a stamped "Filed" copy of your submitted document. A certified copy may be requested for an additional \$30. Expedited services are available. Please contact our office concerning these fees.

Contact our Franchise Tax Section concerning taxes due on any Delaware companies merging out of existence. A check for the tax payment and the filing/assessment fee must accompany the Certificate for filing. Please make your check payable to the "Delaware Secretary of State".

For the convenience of processing your order in a timely manner, please include a cover letter with your name, address and telephone/fax number to enable us to contact you if necessary. Please make sure you thoroughly complete all information requested on this form. It is important that the execution be legible, we request that you print or type your name under the signature line.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don't hesitate to call us at (302) 739-3073.

Sincerely,

Department of State Division of Corporations

encl. rev. 07/04

STATE OF DELAWARE CERTIFICATE OF MERGER OF A FOREIGN LIMITED PARTNERSHIP INTO A DOMESTIC LIMITED PARTNERSHIP

Pursuant to Title 6, Section 17-211 of the Delaware Limited Partnership Act. **First:** The name of the surviving Limited Partnership is ______, a Delaware Limited Partnership. **Second:** The name of the Limited Partnership being merged into the surviving Limited Partnership is a Foreign Limited Partnership. **Third:** The jurisdiction in which this Limited Partnership was formed is _____. **Fourth:** The agreement of merger or consolidation has been approved and executed by each of the business entities which is to merge or consolidate. **Fifth:** The name of the surviving Limited Partnership is_____ **Sixth:** An agreement of merger or consolidation is on file at a place of business of the surviving Delaware Limited Partnership and the address thereof is ______ **Seventh:** A copy of the agreement of merger or consolidation will be furnished by the surviving Limited Partnership, on request and without cost, to any partner of any domestic limited partnership or any person holding an interest in any other business entity which is to merge or consolidate. IN WITNESS WHEREOF, said Limited Partnership has caused this certificate to be signed by it's general partner(s), this ______day of _____, A.D.,____. By:______General Partner Name: ______Print or type